

DARA CASTILLO, PMHNP-BC

Nervous System Education for High-Functioning Minds

A STRUCTURED PRACTICE

The 7-Day Nervous System *Reset Journal*

Seven days of structure. Under five minutes each morning, under five each night, built around the five levers I teach in the clinic.

THIS JOURNAL BELONGS TO

Educational self-tracking tool. Not a substitute for individualized medical care.

Seven days won't rewire you.

It will show you which lever your body responds to. That is a smaller claim than most things you have been sold, and it is the one that actually holds up.

Each day has two pages. The left page teaches one lever and asks you to use it. The right page is where you catch what happened — a four-column tracker and two evening prompts. Nothing here should take more than five minutes at either end of the day. If it does, I designed it wrong.

You are not trying to have a good week. You are trying to collect seven days of honest data about a nervous system you have been guessing about.

— FOUR RULES

- 01 Write it the same day. Memory reliably overweights the worst moment and forgets the ordinary ones — that distortion is the thing you are trying to correct.
- 02 Rate honestly, not aspirationally. A 7 you actually felt is worth more than a 4 you wish you felt.
- 03 Do the practice before you write about it. Reading about regulation is not regulation.
- 04 Finish the week before you judge it. Day 3 is where most people quit, and day 3 is usually noise.

— THE FIVE LEVERS

LIGHT Sets the clock everything else runs on.

BREATH The fastest way into the parasympathetic branch.

MINERALS The raw material your brain needs to make its own brakes.

PAUSE The trainable gap between trigger and reaction.

AWARENESS You cannot retrain a pattern you cannot see.

You are going to miss a day.

Not might. Will. It is the single most predictable thing about a seven-day protocol, and the reason most of them get abandoned on day four is not the missed day — it is what people decide the missed day means.

So let me take that decision away from you now, while you are still motivated and it costs you nothing.

A missed day is a missed day. It is not evidence about your character, your discipline, or whether this works for you. Skipping day four and doing day five is a six-day journal. Quitting on day four is nothing.

— IF THIS HAPPENS, DO THIS

You missed one day	Pick up on the next day's page. Do not go back and reconstruct it from memory — invented data is worse than missing data.
You missed three or four days	Restart at day one. You have lost nothing but a printout, and the tracker only means something if the days are consecutive.
You did the practice but forgot to write it down	Tick the box, leave the ratings blank, move on. Partial data is still data.
You have skipped the same lever twice	That is information, not failure. Note it on day seven — the lever you avoid is often the one worth examining.

— CLINICAL PEARL

In clinic, the patients who improve are not the ones with perfect logs. They are the ones who came back after a bad week. Same principle here.

Where you're starting.

Fill this in before you do anything else. On day seven you will compare against it, and you will not remember this accurately by then — nobody does.

BASELINE ANXIETY, PAST WEEK

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

Settled

Wired

SLEEP QUALITY, PAST WEEK

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

Rested

Wrecked

REACTIVITY — HOW FAST YOU GO FROM CALM TO ACTIVATED

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

Slow fuse

Instant

Where does anxiety show up in your body first?

What time of day is hardest, and what usually precedes it?

What do you currently do that helps, even a little?

What would be different in seven days for this to feel worth it? Be specific and small.

I'M STARTING ON

SIGNED

Anchor the clock

Morning light, evening dark

— WHY IT WORKS

Cortisol is supposed to peak within about thirty minutes of waking and fall across the day. Bright light in your eyes early is the strongest signal your body has for setting that curve, and light after sunset is the strongest signal for flattening melatonin. If your clock is drifting, everything downstream — sleep onset, morning dread, afternoon crashes — drifts with it. This is the lever people skip because it sounds too simple to matter. It is usually the one that moves first.

— TODAY'S PRACTICE

Ten minutes of outdoor light within sixty minutes of waking. Outside, not through a window, and without sunglasses. Overcast counts. Then dim the overheads after 8pm.

TIME I WOKE

TIME I GOT OUTSIDE

MINUTES OUTSIDE

- ☐ Got light within 60 minutes of waking
- ☐ Dimmed lights or wore blue-blockers after 8pm

TIME I ACTUALLY FELL ASLEEP TONIGHT (BEST GUESS)

— CLINICAL PEARL

If you only change one variable this week, change your wake time. Consistency of wake time is more protective for mood than total hours slept.

— NOTES

Anything from today worth remembering.

MORNING CHECK-IN

Three answers. Under a minute.

HOURS SLEPT**WOKE AT****SLEEP QUALITY****FIRST BODY SIGNAL ON WAKING**☐ Chest☐ Jaw☐ Stomach☐ Shoulders☐ Throat☐ Nothing**CAPACITY FOR TODAY**☐

1

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*Empty**Full***TRIGGER & PATTERN TRACKER**

Two or three entries is plenty. Time and what you last ate matter more than you think — circadian and glycemic patterns are invisible without them.

TIME / LAST ATE**WHAT HAPPENED****WHAT MY BODY DID****WHAT I DID NEXT****PEAK INTENSITY TODAY**☐

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EVENING REFLECTION

Two prompts. No marathon.

What did my nervous system respond to today — for better or worse?

What is one thing worth repeating tomorrow?

ANXIETY RIGHT NOW☐

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Find your exhale

The ratio is the whole thing

WHY IT WORKS

The inhale is not the active ingredient. A long exhale is — it slows the heart on each breath out and engages the parasympathetic branch of the vagus nerve, usually within one to three cycles. The physiological sigh is the fastest version: inhale through the nose, add a second short inhale at the top, then exhale slowly and fully through the mouth for roughly twice as long. It works in under a minute, requires no meditation practice, and can be done in a meeting without anyone noticing.

TODAY'S PRACTICE

Use it twice, on purpose, at a moment you choose rather than a moment that chooses you. Rate your body before and after each round so you have a number instead of an impression.

WHEN / WHERE

Round one

BEFORE

0 1 2 3 4 5 6 7 8 9 10

AFTER

0 1 2 3 4 5 6 7 8 9 10

WHEN / WHERE

Round two

BEFORE

0 1 2 3 4 5 6 7 8 9 10

AFTER

0 1 2 3 4 5 6 7 8 9 10

CLINICAL PEARL

Practise it when you are calm. A technique you have never rehearsed will not be available to you at an eight out of ten — that is not a willpower problem, it is a state-dependent memory problem.

NOTES

Anything from today worth remembering.

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Three answers. Under a minute.

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WHAT HAPPENED

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Check the floor

Raw material and steady fuel

— WHY IT WORKS

Magnesium, B6 and glycine are cofactors your brain uses to make GABA — its primary inhibitory neurotransmitter. Low stores mean a nervous system driving without brakes, and subclinical deficiency is common. Blood sugar sits underneath all of it: a spike is followed by a reactive low, and the brain reads that low as a threat. Adrenaline rises, the amygdala fires, and it feels identical to anxiety because physiologically it nearly is. Today is an audit, not a supplement haul.

— TODAY'S PRACTICE

Log what actually went in, at what time. No changes required today — you are looking for the shape of the day, not grading yourself.

- ☐ Protein at breakfast, within an hour of waking
- ☐ Ate something before my first coffee
- ☐ Last caffeine before 2pm
- ☐ Water — roughly on track
- ☐ Walked ten minutes after my largest meal

FIRST THING I ATE, AND WHEN

LONGEST GAP BETWEEN MEALS

LAST CAFFEINE

— BRING THESE TO YOUR OWN PRESCRIBER

This journal does not prescribe. These are the questions worth asking whoever manages your care — tick the ones that apply to you.

- ☐ Should I have magnesium, B12, ferritin or vitamin D checked?
- ☐ Do any of my current medications affect mineral absorption?
- ☐ Is my afternoon crash worth investigating as blood sugar rather than anxiety?
- ☐ Would a supplement interact with anything I am already taking?

— CLINICAL PEARL

If your anxiety spikes at 3–4pm, or you wake between 2 and 4am with a racing heart, suspect glucose before you reach for another anxiolytic. That timing is a pattern, not a coincidence.

— MORNING CHECK-IN

Three answers. Under a minute.

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Catch one reaction

The gap is trainable

— WHY IT WORKS

Between the trigger and your reaction there is a gap. Under stress it collapses to almost nothing, which is why you can know exactly what you should have said and still not say it. The gap is not a personality trait — it is a capacity, and it widens with rehearsal. Two breaths is enough to change what comes out of your mouth. Not because two breaths are magic, but because they are long enough for the slower part of your brain to get a vote.

— TODAY'S PRACTICE

Catch one moment. Just one. Two slow breaths before you respond, then log what happened. One is genuinely enough — the point is proving to yourself that the gap exists, not filling the page.

What happened

What I noticed in my body first

What I did instead of the automatic thing

What that changed — in the moment, or afterwards

— CLINICAL PEARL

Rehearse the pause somewhere low-stakes: a red light, a slow queue, the moment before you open your email. You are not practising for the queue. You are building something that will still be there at a seven out of ten.

— NOTES

Anything from today worth remembering.

— MORNING CHECK-IN

Three answers. Under a minute.

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Name the pattern

Vague is unworkable

— WHY IT WORKS

Most people experience anxiety as one undifferentiated fog, which makes it feel constant and unsolvable. Tracked properly, it is almost never constant. It turns out to be a time of day, a person, a blood sugar dip, a Sunday. Specific is workable. Fog is not. The four columns separate what happened from what your body did from the story you told about it — and those three things are almost never the same, which is precisely the useful part.

— TODAY'S PRACTICE

Fill the tracker on the facing page properly today — three entries, with the story column completed. Then come back here and look for what repeats.

What showed up more than once this week?

Where do the story column and the what-actually-happened column disagree?

If a colleague described this pattern to you, what would you notice immediately?

— CLINICAL PEARL

Two weeks of honest tracking beats six months of discussing it in the abstract. When a patient brings me a log, the first appointment is twice as useful — we skip past “tell me about your anxiety” straight to the pattern. This is also the single best thing you can hand a new prescriber.

— NOTES

Anything from today worth remembering.

MORNING CHECK-IN

Three answers. Under a minute.

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Run all five

And the version for when it goes sideways

— WHY IT WORKS

Today you use the whole framework in one day. Not to prove you can be perfect at it, but to find out what it actually costs you in time and attention — because a protocol you can only run on a good day is not a protocol, it is a hobby. So there are two columns below. The full version, and the version for the day that gets away from you. Most weeks you will need the second one, and there is no penalty for it.

— TODAY'S PRACTICE

Work down the list. Tick what you managed and note the time. Then be honest about which column you were actually in.

LEVER	FULL VERSION	SIDEWAYS VERSION	DID IT
Light	10 min outside within an hour of waking	Stand at the brightest window, 2 min	☐
Breath	Physiological sigh × 3 rounds, twice today	One round, once	☐
Minerals	Protein breakfast, caffeine before 2pm, walk after the big meal	Eat something with protein before coffee	☐
Pause	Two rehearsed pauses in real moments	One pause, anywhere	☐
Awareness	Three tracker entries with the story column	One line: what set it off	☐

WHICH COLUMN WAS TODAY?

☐ Full☐ Sideways☐ Mixed

— CLINICAL PEARL

The sideways column is not the failure version. It is the version that keeps the thread intact on a bad week, and an intact thread is what separates people who still have a practice in March from people who had a great week in January.

— NOTES

Anything from today worth remembering.

— MORNING CHECK-IN

Three answers. Under a minute.

HOURS SLEPT

WOKE AT

SLEEP QUALITY

FIRST BODY SIGNAL ON WAKING

☐ Chest☐ Jaw☐ Stomach☐ Shoulders☐ Throat☐ Nothing

CAPACITY FOR TODAY

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*Empty**Full*

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Your baseline snapshot

Day one against day seven

— WHY IT WORKS

Go back to day zero and read what you wrote before you rate anything today. Do it in that order — if you rate first, you will anchor to how you feel this minute, and one bad evening will erase a good week. You are not looking for a transformation. You are looking for movement, and for which lever the movement followed.

— TODAY'S PRACTICE

Rate the same three scales you rated on day zero. Then find the lever your body actually responded to and commit to keeping exactly one.

— THEN AND NOW

ANXIETY

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

Settled

Wired

SLEEP QUALITY

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

Rested

Wrecked

REACTIVITY

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

Slow fuse

Instant

— CLINICAL PEARL

Reprint this journal and run it again whenever your baseline slides — after a move, a deadline season, a bad stretch of sleep. The tracker is worth repeating on its own.

— NOTES

Anything from today worth remembering.

Which lever produced the clearest change, and what was the evidence?

Which one did you avoid? What do you make of that?

What pattern showed up in the tracker that you had not seen before?

— THE ONE YOU'RE KEEPING

One. Not three. A single practice you still do in a month beats five you abandoned in ten days.

THE LEVER I'M KEEPING

WHEN IT HAPPENS, SPECIFICALLY

WHAT IT ATTACHES TO (AN EXISTING HABIT)

— BRING TO YOUR NEXT APPOINTMENT

The two or three things from this week you would not want to forget to say.

What to do with this.

You now have something most people never get: seven consecutive days of honest data about your own nervous system. Do not let it sit in a drawer.

If you work with a prescriber or a therapist, bring it. A completed tracker changes the first ten minutes of an appointment from “tell me about your anxiety” to looking at an actual pattern together. That is worth more than anything else in this file.

And if the week showed you something bigger than a journal can hold — that is not a failure of the journal. That is useful information too.

— PLEASE DON'T JOURNAL THROUGH THESE

- Thoughts of harming yourself, or feeling that others would be better off without you
- Anxiety that stops you working, eating, or leaving the house
- Panic attacks that are escalating in frequency
- Using alcohol or substances to get through the day

In the US, call or text 988 for the Suicide & Crisis Lifeline, any time. If you are in immediate danger, call 911.

— MENTIONED IN THIS JOURNAL

Some links are affiliate — they cost you nothing extra.

Practitioner-grade supplements · Fullscript

us.fullscript.com/welcome/darswellnessshub

Blue-blocking eyewear · RA Optics

raoptics.com/DARA

— WORK WITH ME

If you want the version with a clinician in it

Telehealth psychiatry for Florida residents. Integrative approach, self-pay.

daracastle.com hello@daracastle.com [@pmhnppdar](https://www.instagram.com/pmhnppdar)

Not medical advice. This journal is an educational self-tracking tool. It does not create a provider–patient relationship, diagnose, or treat any condition. Talk to your own clinician before starting or stopping anything.